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CONFIRMATION NO. 6245

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|-----------------------------|--|--------------|------------------------|---------------------------------------|
| SERIAL NUMBER<br>10/799,344 | FILING OR 371(c)<br>DATE<br>03/11/2004<br>RULE | CLASS<br>703 | GROUP ART UNIT<br>2123 | ATTORNEY<br>DOCKET NO.<br>4314.77US01 |
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## APPLICANTS

Michael Craig Marshall, Savage, MN;

## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
\*\* 05/27/2004

|                                 |   |                        |                      |                   |                         |
|---------------------------------|---|------------------------|----------------------|-------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input type="checkbox"/> no  | STATE OR COUNTRY<br>MN | SHEETS DRAWING<br>11 | TOTAL CLAIMS<br>7 | INDEPENDENT CLAIMS<br>2 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                        |                      |                   |                         |

Verified and Acknowledged      Examiner's Signature      Initials

## ADDRESS

23552

## TITLE

SYSTEM AND METHOD FOR GENERATING AN ELECTRONIC MODEL FOR A DENTAL IMPRESSION HAVING A COMMON COORDINATE SYSTEM

|                             |   |   |
|-----------------------------|---|---|
| FILING FEE RECEIVED<br>1500 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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